# INFORMATION AND INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR EDUCATION BENEFITS

PRIVACY ACT INFORMATION: No benefits can be paid unless a completed application has been received (38 U.S.C. 3513). The information requested on this form is necessary to determine your eligibility to education benefits. The responses you submit are considered confidential (38 U.S.C.5701) and may be disclosed outside VA only if the disclosure is authorized under the Privacy Act, including routine uses identified in the VA system of records, 58VA21/22. Compensation, Pension, Education and Rehabilitation Records - VA, published in the Federal Register.

RESPONDENT BURDEN: VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.

1. GENERAL - Read this information and instruction sheet carefully and then complete Items 1 thru 32 on the application fully

# 2. ELIGIBILITY

- a. To qualify for educational assistance you must be either:
- (1) The son, daughter, or spouse of a veteran who is permanently and totally disabled as the result of a service-connected disability, or the son, daughter, or spouse of an individual on active duty who has been listed for a total of more than 90 days as missing in action, captured in line of duty by a hostile force, or forcibly detained or interned in line of duty by a hostile force, or forcibly detained or interned in line of duty by a foreign government or power; or
- (2) The son, or daughter, or surviving spouse of a veteran who died of a service-connected disability or who died while a service-connected disability was rated total and permanent in nature.
- b. Eligibility for educational assistance will be terminated in the event VA determines that the person on whose account benefits are claimed is no longer totally disabled, or VA is notified that the person is no longer listed as captured, missing in action or forcibly
- c. Generally, the period of eligibility for a son or daughter is between the ages of 18 and 26 years. In certain instances, it is possible to begin training before age 18, and to continue after age 26. The marriage of a son or daughter is not a bar to this benefit.
- d. A spouse may use educational benefits during the 10-year period after eligibility is found. A surviving spouse may use these benefits during a 10-year period after the veteran's death, or 10 years after VA determines the veteran's death was caused by a service-connected disability. Eligibility will terminate in the event a spouse is divorced from the veteran or in the event of remarriage by a surviving spouse.

NOTE: "Son" or "daughter" includes stepson or stepdaughter.

## 3. ENTITLEMENT

- a. The Dependents' Educational Assistance program offers eligible persons up to 45 months of full-time training benefits.
- b. Entitlement is reduces by 1 month of full-time training. Proportionate reductions are made if training is less than full-time.
- c. Persons who are entitled to benefits under more than one of the VA educational assistance programs may receive an overall maximum of 48 months of benefits.
- 4. COUNSELING VA will provide you with educational or vocational counseling if you request it. VA counseling can help you: find out more about your abilities and interests; learn about opportunities in different fields of work; and determine the type of training or employment that is best for you. To request counseling, contact your nearest VA office. There is no charge for VA counseling. However, you must pay for the cost of traveling from your home to the counseling session. If you are required to receive counseling (see paragraphs 5b and 5c below), VA will provide assistance to cover the cost of travel. EXCEPT FOR THE REPUBLIC OF THE PHILIPPINES, VA COUNSELING IS NOT AVAILABLE IN FOREIGN COUNTRIES.
- 5. COURSES AND PROGRAMS YOU MAY PURSUE
- a. Any eligible person may pursue postsecondary courses approved by the State approving agency at a vocational or technical school,

business college, college or university. Benefits are also payable while pursuing an approved apprenticeship, on-the-job training, cooperative or farm cooperative program. Courses may be taken in a foreign country if they lead to a standard college degree or its equivalent, and vocational courses may also be taken in the Republic of the Philippines.

b. A son and daughter who is under 18 and who has not completed high school must have his or her program of education or training approved by a VA counselor before educational assistance benefits can be authorized.

c. Specialized restorative training can be approved for a son or daughter, and specialized vocational training can be approved for any eligible person, if it is determined through VA counseling that a specialized program is needed to overcome the effects of a physical or mental handicap.

- d. An eligible person who has not received a high school diploma or equivalent can pursue approved secondary-level programs. An eligible person can also pursue refresher, remedial, or deficiency courses that are needed for admission into an education program.
- e. A spouse or surviving spouse may pursue an approved home study course. Information on home study courses is available at the nearest VA regional office.
- (1) If you are considering enrollment in a home study course or combination correspondence-residence course, be sure that the field of study is suitable to your abilities and interests before signing a contract with the school. You should consider your decision carefully since the contract you sign may require you to pay for all or the majority of the course even though you complete only a portion of it.
- (2) The law provides that a contract for enrollment in a home study course must be affirmed by a student after more than 10 days have elapsed following the date the contract was signed. No payments of VA benefits will be authorized for any lessons serviced by the school prior to the date of affirmation of the contract. If you decide not to enroll in a correspondence course after signing a contract, but before you sign the affirmation, you are entitled to receive a full refund from the school of any payment made for the course.

# 6. EDUCATIONAL ASSISTANCE ALLOWANCE

- a. If you attend school at the rate of one-half-time or more, you will be entitled to receive a monthly allowance to help you with the cost of tuition, fees, books, supplies, and other costs of school attendance. If you pursue courses at less than one-half time, you will generally received a single payment based on the tuition and fees charged for your course(s), not to exceed the maximum rate established for quarter-time or half-time training, as applicable.
- b. You will generally be paid through breaks between standard terms if the break does not span a full calendar month. However, you may wish to save entitlement by asking VA not to make payments for any breaks. Except for advance payments, checks are normally sent at the first of each month for the previous month's training.
- c. Payments for on-the-job or apprenticeship training are not released until after a monthly report of hours worked is processed. If less than 120 hours are worked in a month, less than a full benefit payment is made.
- d. Payments for correspondence courses are made each calendar quarter after a certification of lessons completed is processed.

NOTE: Sons and daughters are not eligible for correspondence training.

**VA FORM** 22-5490 SEP 1998

#### 7. RESTRICTIONS

- a. Benefits may be authorized only for pursuit of approved courses leading to an educational, professional, or vocational objective for which you are not already qualified.
- b. Eligibility for educational assistance will be terminated in the event VA determines that the person on whose account benefits are claimed is no longer totally disabled, or VA is notified that the person is no longer listed as captured, missing in action or forcibly detained.
- c. VA benefits are not payable under this program while an eligible person is serving on active duty in the Armed Forces.
- d. Benefits cannot be authorized for any courses that are taken by an employee of the Federal government under the Government Employees' Training Act.
- e. VA benefits are not payable while an eligible person is in receipt of benefits for the same program from the Office of Worker's Compensation Programs.
- f. Benefits are subject to reduction or termination during periods if incarceration in a Federal, State, or local correctional facility as the result of conviction for a felony offense.
- g. Benefits cannot be paid for audited courses. Further, benefits will not be payable for a course from which you withdraw, or for a course in which you receive a grade that does not count toward graduation, unless acceptable mitigating circumstances are presented.
- h. Schools are prohibited by law from cashing VA checks under a power of attorney agreement.
- 8. CHANGE OF PROGRAM A change of program is a change of your educational, professional or vocational objective from the objective you were last pursuing if the experience and credits you have accumulated are not transferable to your new program at essentially full value.
- a. You may be authorized one optional change of program upon your request if progress and conduct in your original program were satisfactory.
- b. You may apply for a second (or additional) change of program. However, benefit payments cannot be authorized for the change unless your program is shown to be suitable to your aptitudes, interests and abilities.
- 9. HOW TO APPLY Select the program you wish to pursue. Then, make sure the course(s) at the school or the program at the training establishment is approved for the enrollment of veterans and eligible persons. You can obtain information about approved courses and programs from the VA regional office serving the area where the school or training establishment is located. If you would like educational or vocational counseling before you select a program of education or training, please refer to paragraph 4. You will be notified of the date, time and place to report for counseling if you request it.
- a. Complete the application and send it directly to the VA regional office as early as possible before you plan to enroll; or
- b. If you have already enrolled, give your completed application to your school or training establishment for submission to VA together with an Enrollment Certification, VA Form 22-1999.
- 10. ADVANCE PAYMENT You may be eligible for an advance payment for the initial or partial month of your enrollment plus payment for the following month. Advance payment checks are mailed to your school for delivery to you at the time of registration, but not earlier than 30 days before your enrollment begins. You may be eligible if:
- a. You enroll in an approved institutional, educational or vocational program on at least a one-half time basis;
- b. Your school agrees to process as advance payment;
- c. You request an advance payment in writing; and
- d. Your application with an enrollment certification and request for advance payment are received by VA at least 30 days in advance of registration.

Your request for an advance payment may be entered on VA Form 22-1999, Enrollment Certification, or a separate page attached to the enrollment certification that your school submits to VA,

# 11. CHANGES YOU NEED TO REPORT

- a. If you reduce or terminate your school attendance or training, or otherwise change your enrollment, inform the certifying official of your school or training establishment to notify VA immediately. You are responsible for making sure the certifying official notifies VA of any such changes in your enrollment. You will be responsible for any overpayment resulting from these changes.
- b. Promptly notify VA of any change in your address. Send your complete new address, to include your ZIP Code.
- c. A spouse or surviving spouse must report any change in marital status, to include the following:
  - (1) Separation from the veteran
  - (2) Divorce from the veteran
  - (3) Remarriage following the death of the veteran
- d. If you withdraw from a course or course(s), or if you complete a course but receive a grade which does not count toward graduation requirements, benefits may be reduced or discontinued from the beginning of the term, unless mitigating circumstances are shown. You should report the mitigating circumstances, if any, within I year from the date of withdrawal or receipt of a grade which does not count toward graduation.
- 12. UNSATISFACTORY PROGRESS OR CONDUCT Benefits will be discontinued if you fail to maintain satisfactory progress or conduct in accordance with the standards of your school. Resumption of benefits may be authorized if it is shown that the cause for the unsatisfactory progress or conduct has been removed and that the selected program is suitable to your aptitudes, interests and abilities.
- 13. ELECTION BY SON OR DAUGHTER An election of Chapter 35 educational benefits is final and cannot be changed. This means that further payments of compensation, pension, or dependency and indemnity compensation based on school attendance after your 18th birthday are prohibited once you cash your first benefit check under this chapter.

IMPORTANT - IF YOU ARE PLANNING A PROGRAM OF EDUCATION LONGER THAN 45 MONTHS, YOU MAY FIND IT TO YOUR ADVANTAGE TO DEFER CHAPTER 35 BENEFITS FOR A TIME AND CONTINUE COMPENSATION, PENSION OR DEPENDENCY AND INDEMNITY COMPENSATION BENEFITS WHICH ARE PAYABLE AS A RESULT OF YOUR SCHOOL ATTENDANCE.

If it appears that a deferral of Chapter 35 benefits might be to your advantage, we strongly recommend that you discuss with a VA counselor the various options open to you. A VA counselor can help you plan your program to maximize benefits and can provide help in establishing a future date to elect Chapter 35 benefits. However, if it does not appear that a deferral would be to your advantage, complete Item 27 showing the date from which you wish to elect chapter 35 benefits.

14. INFORMATION PAMPHLET - You should have received VA Pamphlet 22-73-3, Summary of Educational Benefits Under the Survivors' and Dependents' Educational Assistance Program, Chapter 35 of Title 38, U.S.Code with your application. VA will send you a pamphlet if you check "No" in Item 28. You may also request a pamphlet from the person who gave you this application.

MORE HELP - If you need help in completing this application or if you require further information on VA benefits, you can call VA TOLL-FREE at (800) 827-1000. If you use TDD, call toll-free to (800) 829-4833. You can also get education assistance even after normal business hours at our education internet site: www.va.gov/education/.

# **HOW TO FILE YOUR CLAIM**

After completing the fill-in portion of this application, do the following:

If you have selected a school or training establishment,

- \* Give the completed portion of this application to the veteran's certifying official at the school or training establishment you have selected.
- \* Request the certifying official to complete VA Form 22-1999, Enrollment Certification.
- \* Have the school certifying official send both your application and the Enrollment Certification to VA.

If you have not selected a school or training establishment,

\* Send the completed portion of this application to the regional processing office in the region of your home address.

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ANNUMENT FENDING?  YES NO  16A. HAVE YOU EVER SERVED ON ACTIVE DUTY IN THE ARMED SERVICES  YES NO  16C. ACTIVE DUTY DATES FROM  170. WILL YOU RECEIVE EDUCATIONAL ASSISTANCE ASPERTS FOR YOUR TRAINING UNDER ETHER ARMED SERVICES  170. WILL YOU RECEIVE EDUCATIONAL ASSISTANCE ASPERTS FOR YOUR TRAINING UNDER ETHER ACT?  PART IV - VA BENEFITS AND EDUCATIONAL ASSISTANCE ASPERTS FOR YOUR TRAINING UNDER ETHER ACT?  PART IV - VA BENEFITS AND EDUCATION ACT OR THE GOVERNMENT EMPLOYEES TRAINING ACT OF THE GOVERNMENT EMPLOYEES TRAINING  181. TYPE OF BENEFITS (Check applicable box(s6))  182. SURVIVORS AND DEPENDENTS  183. HYPE OF BENEFITS (Check applicable box(s6))  184. NONE  185. SURVIVORS AND DEPENDENTS  186. OR MEDICAL CARE  186. OR MEDICAL CARE  187. WILL YOU RECEIVE EDUCATIONAL ASSISTANCE ASPERTS FOR YOUR TRAINING UNDER ETHER ACT?  ACT?  OR TRAINING PREVIOUSLY APPLIED FOR  188. IN TYPE OF BENEFITS (Check applicable box(s6))  189. SURVIVORS AND DEPENDENTS  189. WOR OF TRAINING PREVIOUSLY APPLIED FOR  189. NOW OF VETERAN  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (CITY and STATE)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (CITY and STATE)  189. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (CITY and STAT						ON CONCEP	RNING A	PPLICANT		LUCTEDANI ON WILLOCK ACCOUNT
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B HOSPITALIZATION OF TRAINING BASED ON YOUR DOWN SERVICE (Complete lems 19A and 19B)  C DISABILITY COMPENSATION F DENTAL OF RENSION  19A. YOUR OWN VA FILE NUMBER  19B. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  19B. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  19B. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  19B. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  19B. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  19B. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  19B. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  19B. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  19B. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  20B. NAME OR DESCRIPTION OF COURSE  20F. NAME OR COURSE (City and State)  21C. PLACE OF TRAINING  21D. PLACE OF TRAINING  21D. PLACE OF TRAINING  22D. NAME OR CITY AND C		(Check appli	cable box(es))  D SURVIVO EDUCATI (Complete	RS' AND DEF ONAL ASSIST	PENDENTS G. [		(۱۰		18H. N/	AME OF VETERAN
19A. YOUR OWN VA FILE NUMBER  19B. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  PART V - PREVIOUS EDUCATION AND TRAINING  20A. TYPE OF SCHOOL OF YEARS COMPLETED  20C. FROM 20D. TO DESCRIPTION OF COURSE  20F. NAME OR OF SCHOOL (City and State)  20F. NAME OR OF COURSE  20F. NAME AND LOCATION OF SCHOOL (City and State)  20F. NAME AND LOCATION OF SCHOOL (City and State)  20F. NAME AND LOCATION OF SCHOOL (City and State)  20F. NAME OR OF COURSE  20F. NAME AND LOCATION OF SCHOOL (City and State)  20F. NAME AND LOCATION OF SCHOOL (City and State)  20F. NAME AND LOCATION OF SCHOOL (City and State)  20F. NAME OR OF COURSE (If any Interpretation of Course (Interpretation	B. HOSPITALIZATI	ION ARE						Item 18D	18I. VE	TERAN'S FILE NUMBER (If known)
198. VA OFFICE WHERE YOUR RECORDS ARE LOCATED (City and State)  PART V - PREVIOUS EDUCATION AND TRAINING  20A. TYPE OF SCHOOL OF YEARS COMPLETED OF YEARS OF YEA	C DISABILITY COL	MPENSATIO	N F DENTAL	OR ENT TREATM	FNT					
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20A. TYPE OF SCHOOL OF YEARS COMPLETED 20E. NAME OR DESCRIPTION OF COURSE 20F. NAME AND LOCATION OF SCHOOL (City and State)  ELEMENTARY SCHOOL  HIGH SCHOOL  COLLEGE  VOCATIONAL OR TRADE  20G. CHECK APPROPRIATE BOX AND ENTER DATE IN ITEM 20H  GRADUATED FROM SEXPECT TO DISCONTINUED DISCONTINUED DISCONTINUED DISCONTINUE  21A. NAME OF APPRENTICESHIP OR OTHER ON-THE-JOB TRAINING COURSE (If any)  21A. NAME OF APPRENTICESHIP OR OTHER ON-THE-JOB TRAINING COURSE (If any)  22A. HAVE YOU EVER HELD A LICENSE TO PRACTICE A PROFESSION OR JOURNEYMAN RATING TO WORK AT A TRADE? (Examples - electrician, radio operator, teacher, lawyer, CPA, bricklager, carpenter, etc.)  YES NO (If "Yes, complete lems 22B and 22C)				PART V - I	PREVIOUS EDU	CATION AN	D TRA	NING		
OF SCHOOL COMPLETED  20C. FROM  20D. TO  DESCRIPTION OF COURSE  (City and State)	201	B NO	DATES A						NI A BAF	AND LOCATION OF SCHOOL
SCHOOL  HIGH SCHOOL  COLLEGE  VOCATIONAL OR TRADE  20G. CHECK APPROPRIATE BOX AND ENTER DATE IN ITEM 20H  GRADUATED FROM EXPECT TO DISCONTINUED DISCONTINUED DISCONTINUE  HIGH SCHOOL  21A. NAME OF APPRENTICESHIP OR OTHER ON-THE-JOB TRAINING COURSE (If any)  21A. NAME OF APPRENTICESHIP OR OTHER ON-THE-JOB TRAINING COURSE (If any)  21A. HAVE YOU EVER HELD A LICENSE TO PRACTICE A PROFESSION OR JOURNEYMAN RATING TO WORK AT A TRADE? (Examples - electrician, radio operator, leacher, lawyer, CPA, bricklayer, carpenter, etc.)  YES NO (If "Yes," complete Items 22B and 22C)  23B. PRINCIPAL OCCUPATION  23C. NUMBER OF MONTHS EMPLOYED	20A. TYPE OF	YEARS	20C. FROM	20D. TO	1 DECCE	RIPTION OF	COURS		NAME	(City and State)
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VOCATIONAL OR TRADE  20G. CHECK APPROPRIATE BOX AND ENTER DATE IN ITEM 20H  GRADUATED FROM SPADUATE DESCRIPTION OF THIS SCHOOL OF TRAINING  21A. NAME OF APPRENTICESHIP OR OTHER ON-THE-JOB TRAINING COURSE (If any)  21A. HAVE YOU EVER HELD A LICENSE TO PRACTICE A PROFESSION OR JOURNEYMAN RATING TO WORK AT A TRADE? (Examples - electrician, radio operator, teacher, lawyer, CPA, bricklayer, carpenter, etc.)  YES NO (If "Yes," complete Items 22B and 22C)  22B. NAME OF LICENSE OR JOURNEYMAN RATING  22C. STATE IN WHICH HELD  23C. NUMBER OF MONTHS EMPLOYED	нідн ѕсноог				,					
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TYES NO (If "Yes," complete Items 23B and 23C)	YES NO (A	f "Yes," comp BEEN EMPL	lete Items 22B and 2 OYED?	2C)	23B. PRINCI	PAL OCCUPA	TION	·	230	C. NUMBER OF MONTHS EMPLOYED IN THIS OCCUPATION

PART VI - VA	COUNSELING	
24. VA has professional career counselors who can help you plan your school or training facility. If you are a disabled spouse or child, VA ma program of training. If you are a child under age 18, and have not comp VA counseling. If you feel you may require VA counseling, contact dialing area of a VA office, call 1-800-827-1000. Call 1-800-829-4833 during the period of your eligibility for educational assistance.	y require that you receive counseling deted high school, you cannot receive your nearest VA office as soon as	e VA educational assistance without nossible. If you are not in the local
PART VII - EDUC	CATIONAL PLAN	
IMPORTANT: If you have selected the program for which you would lil		please complete Items 25 and 26.
25A. IF YOU KNOW THE PROGRAM YOU WANT, WHAT IS THE FINAL EDUCATIONAL, PROFESSIONAL, OR VOCATIONAL GOAL YOU PLAN TO REACH? (Highest degree or occupation)	25B. IF YOU HAVE SELECTED YOUR PYOU WILL BE TAKING (List each d	ROGRAM, DESCRIBE THE COURSE(S) iploma, and degree or vocational course)
		·
25C. NAME AND ADDRESS OF SCHOOL OR TRAINING ESTABLISHMENT	25D. EXPECTED DATE OF ENROLLMENT	26E. LENGTH OF PROGRAM
	25F. EDUCATION OR TRAINING WILL B	E BY:
	SCHOOL ATTENDANCE INDEPENDENT STUDY FARM COOPERATIVE	APPRENTICESHIP OR ON-THE-JOB CORRESPONDENCE (Spouse or surviving spouse only)
26. ESTIMATE COST OF YOUR COMPLETE PROGRAM	B. BOOKS AND OTHER FEES	C. TOTAL COST
PART VIII - ELECTION (SC	IN OR DAUGHTER ONLY)	1.
IMPORTANT: Once you start a chapter 35 program, generally, you condemnity compensation which might otherwise be payable as a result in the interval of the int	ult of your school attendance. CA K. WE STRONGLY ENCOURAGE NSELOR.	REFULLY READ THE ITEM 13 E EACH PERSON TO DISCUSS
PART IX - INFORM	ATION PAMPHLET	
PART IX - INFORM  28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF EDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.		VIVORS' AND DEPENDENTS'
		VIVORS' AND DEPENDENTS'
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF EDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.		VIVORS' AND DEPENDENTS'
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF ECEDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)		VIVORS' AND DEPENDENTS'
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF ECEDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)		VIVORS' AND DEPENDENTS'
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF ECEDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)		VIVORS' AND DEPENDENTS'
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF ECEDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)		VIVORS' AND DEPENDENTS'
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF ECEDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)		VIVORS' AND DEPENDENTS'
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF ECEDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)	UCATIONAL BENEFITS UNDER THE SUR	VIVORS' AND DEPENDENTS'
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF ED EDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)  29. REMARKS  PART X - SI	CODE?  GNATURES	VIVORS' AND DEPENDENTS'
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF ED EDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)  29. REMARKS  PART X - SI  NOTE - If the applicant is a minor, the parent, guardian, or custod  I CERTIFY THAT the information given in this application is true and according to the content of the con	GNATURES  ian MUST sign Item 31A.  courate to the best of my knowledge	and belief. If I request counseling, I
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF ED EDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)  29. REMARKS  PART X - SI  NOTE - If the applicant is a minor, the parent, guardian, or custod I CERTIFY THAT the information given in this application is true and ac authorize release of school and testing records to VA for use in counseling the second of the second	GNATURES  ian MUST sign Item 31A.  courate to the best of my knowledge	and belief. If I request counseling, I feducation or training.
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF ED EDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)  29. REMARKS  PART X - SI  NOTE - If the applicant is a minor, the parent, guardian, or custod I CERTIFY THAT the information given in this application is true and ac authorize release of school and testing records to VA for use in counseling the second of the second	GNATURES ian MUST sign Item 31A. ceurate to the best of my knowledge g me and supervising my program o	and belief. If I request counseling, I feducation or training.
28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF ED EDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)  29. REMARKS  PART X - SI  NOTE - If the applicant is a minor, the parent, guardian, or custod I CERTIFY THAT the information given in this application is true and ac authorize release of school and testing records to VA for use in counselin 30A. SIGNATURE OF APPLICANT	GNATURES ian MUST sign Item 31A. ceurate to the best of my knowledge g me and supervising my program o	and belief. If I request counseling, I feducation or training.
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28. DID YOU RECEIVE AN INFORMATION PAMPHLET ENTITLED "SUMMARY OF EE EDUCATIONAL ASSISTANCE PROGRAM" FOR CHAPTER 35 OF TITLE 38, U.S.  YES NO (See specific instructions about Information Pamphlet)  29. REMARKS  PART X - SI  NOTE - If the applicant is a minor, the parent, guardian, or custod I CERTIFY THAT the information given in this application is true and at authorize release of school and testing records to VA for use in counseling 30A. SIGNATURE OF APPLICANT  31A. IF APPLICANT IS A MINOR, GIVE NAME OF PARENT, GUARDIAN, OR CUSTODIAN (Type or print)	GNATURES  Ian MUST sign Item 31A.  Excurate to the best of my knowledge g me and supervising my program o  30B. DATE SIGN  31B. ADDRESS (Include ZIP Code)	and belief. If I request counseling, I feducation or training.